



RECEIPT

FILE COPY

Practitioner's Docket No. 5205 P3005.001

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: Prabhakar et al

Application No.: 09 / 578,277 Group No.: 2747

Filed: May 25, 2000

Examiner:

For: MEDICINE ADMINISTRATION METHOD

Assistant Commissioner for Patents
Washington, D.C. 20231

RECEIVED

AUG 22 2000

1C 2700 MAIL ROOM

REQUEST FOR CORRECTED FILING RECEIPT

1. Attached is a copy of the official filing receipt received from the PTO in the above application for which issuance of a corrected filing receipt is respectfully requested.
2. There is an error with respect to the following data, which is:

 incorrectly entered

and/or

 omitted.

Error in

1. Applicant's name
2. Applicant's address
3. Title
4. Filing Date
5. Application Number
6. Foreign/PCT Application Re:
7. Other

Correct data

- 1.
- 2.
3. MEDICINE ADMINISTRATION METHOD
- 4.
- 5.
- 6.
- 7.

CERTIFICATE OF MAILING/TRANSMISSION (37 C.F.R. § 1.8a)

I hereby certify that this correspondence is, on the date shown below, being:

MAILING

 deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

FACSIMILE

 transmitted by facsimile to the Patent and Trademark Office.

Signature

Staci Korpal

(type or print name of person certifying)

(Request for Corrected Filing Receipt [5-8]—page 1 of 2)

Date: August 4, 2000

3.

(complete the following applicable item)

- A. The correction(s) is/are not due to any error by applicant and no fee is due.

OR

- B. At least one of the above corrections is due to applicant's error and the fee therefor, under 37 C.F.R. § 1.19(h), of \$25.00 is paid as follows:

- Enclosed is check for \$25.00.
 Charge Account _____ \$25.00.

Robert L. Farris

SIGNATURE OF PRACTITIONER

Reg. No.: 25,112

Robert L. Farris

(type or print name of practitioner)

Tel. No.: (517) 799-5300

5291 Colony Drive North

P.O. Address

Customer No.:

Saginaw, Michigan 48603

(Request for Corrected Filing Receipt [5-8]—page 2 of 2)



Bib Data Sheet



UNITED STATES DEPARTMENT OF
COMMERCE
Patent and Trademark Office

FILE COPY

Address: COMMISSIONER OF PATENTS AND TRADEMARKS
Washington, D.C. 20231

SERIAL NUMBER 09/578,277	FILING DATE 05/25/2000 RULE _____	CLASS 700	GROUP ART UNIT 2747	ATTORNEY DOCKET NO. 5205 P3005.01
-----------------------------	---	--------------	------------------------	---

APPLICANTS

Indira C. Prabhakar, Saginaw, MI ;
Bangalore Prabhakar, Saginaw, MI ;

**** CONTINUING DATA *********** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE****GRANTED ** 07/29/2000****** SMALL ENTITY ****

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY MI	SHEETS DRAWING 2	TOTAL CLAIMS 6	INDEPENDENT CLAIMS 2
Verified and Acknowledged Examiner's Signature _____ Initials _____					

ADDRESS

Reising Ethington Barnes Kisselle Learman
& McCulloch P C
5291 Colony Drive North
Saginnaw ,MI 48603

TITLE

Medicine administration method

FILING FEE RECEIVED 345	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input checked="" type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other <input type="checkbox"/> Credit
-----------------------------------	---	--

FILING RECEIPT

AUG 07 2000

OC00000005282139

OFFICE 86


**UNITED STATES DEPARTMENT OF COMMERCE
Patent and Trademark Office**

 Address: ASSISTANT SECRETARY AND
COMMISSIONER OF PATENT AND TRADEMARKS
Washington, D.C. 20231

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY.DOCKET.NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/578,277	05/25/2000	2747	345	5205 P3005.01	2	6	2

Reising Ethington Barnes Kisselle Learman
& McCulloch P C
5291 Colony Drive North
Saginaw, MI 48603

Date Mailed: 07/31/2000

 TC 2700 MAIL
AUG 22 2000
RECEIVED

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)
 Indira C. Prabhakar, Saginaw, MI ;
 Bangalore Prabhakar, Saginaw, MI ;
Continuing Data as Claimed by Applicant**Foreign Applications****If Required, Foreign Filing License Granted 07/29/2000****** SMALL ENTITY ******Title**

Medicine administration method technical field

Preliminary Class

700

Data entry by : DAY, MARIAN**Team : OIPE****Date: 07/31/2000**